The subject matter is treated in somewhat didactic fashion, and is illustrated more often by line drawings or diagrams than by roentgenograms. Many of the line drawings are excellent and should be of use to the beginner in radiology. Most of the roentgenograms are adequate.

The sections on pulmonary and cardiac lesions reflect the earlier teachings of the Viennese school of medicine and radiology. Those of the gastrointestinal and abdominal areas reflect an even earlier school. For example, the author has sections on gastroptosis and other conditions, which can scarcely be regarded as consistent with modern concepts.

Considering the broad scope of the undertaking, the author can be regarded as having made a remarkably compact contribution. The text is clear; the indexing adequate for the purposes at hand.

\* \* \*

CHEST X-RAY DIAGNOSIS. By Max Ritvo, M.D., Assistant Professor of Radiology, Harvard Medical School; Instructor in Radiology, Tufts Medical School; Roentgenologist-in-Chief and Director, Department of Radiology, Boston City Hospital. 615 illustrations on 418 engravings and a colored plate. Lea & Febiger, Philadelphia, 1951. 558 pages. \$15.00.

This fairly thick monograph covers the x-ray diagnosis of diseases of the chest in a series of ten sections. These sections are as follows: Lungs, mediastinum, diaphragm, pleura, bony thorax and soft tissues, soft tissues of neck, heart and great vessels, aorta, pulmonary artery and pericardium. The introductory section is sound, and the suggestions for methods of studying the roentgenograms are well laid out.

The author considers roentgenography before roentgenoscopy, which is perhaps the reverse of the ideal method of examining the chest. He implies, but does not stress adequately, the need for thorough examination. The average physician would never be content with a single posterior-anterior film of the gastrointestinal tract, by a single anterior-posterior urogram in studies of the urinary tract. However, all too many physicians attempt to reach decisive conclusions on the basis of just a single posterior-anterior roentgenogram of the chest.

One would prefer that lateral and oblique illustrations accompanied the posterior-anterior views reproduced extensively throughout the book. These reproductions are fortunately in negative form and of good quality. There are a few statements in the text and a few legends which might bear revision in the next edition. For example, on page 20 is an illustration of a rather overexposed roentgenogram of a young patient with the heading, "Normal Chest." It might be more precise to say "negative chest" or "healthy chest."

Similarly, on page 96 is an illustration entitled "Bronchitis." It is generally accepted by most radiologists and pathologists that the diagnosis of bronchitis from a single posterior-anterior chest roentgenogram is not only difficult but hazardous. On page 97 appears the statement, "An attack of acute bronchitis may reactivate an old inactive tuberculosis." Even if correct, this appears somewhat tautologic in a work of this type.

The illustration on page 478 entitled "Myocardial Calcification" looks more like calcification of the mitral annulus to this reviewer. Perhaps the author had autopsy verification of the legend, and if so this might be noted in the next edition.

The volume is well printed and well bound. The index is adequate.

HOPE AND HELP FOR THE ALCOHOLIC. By Harold W. Lovell, M.D., Doubleday & Company, Inc., Garden City, New York, 1951. 215 pages. \$2.75.

This book is directed to the alcoholic, and perhaps even more to his relatives and friends, on whose shoulders falls the burden of seeing that he is treated. Considering the incidence of the condition, it should have a good sale.

In spite of having been written for the lay reader, it is quite well done and contains much less information of questionable authority than many scientific works dealing with this subject. The factors underlying alcoholism as a disease are presented, as well as the facilities, medical and religious, for its relief. All of this should be of interest to the physician, who is frequently called on to advise the family in regard to the treatment of alcoholics. The author's conclusion is that, much as medicine has contributed to an understanding of the psychopathology of alcoholism, the results of medical treatment are far from satisfactory, and Alcoholics Anonymous can claim a better batting average than can the psychiatrist.

OPERATIVE SURGERY. By Sir Lancelot Barrington-Ward, K.C.V.O., Ch.M., F.R.C.S. (Edin.), F.R.C.S. (Eng.), Surgeon to H.M. King George VI, Senior Surgeon, Hospital for Sick Children, and to the Royal Northern Hospital, London, etc. Second Edition, with 498 illustrations. Grune and Stratton, New York, 1951. 638 pages. \$13.50.

Most American books on surgery that emphasize the technical aspects of surgery tend to be rather highly specialized and limited in scope of excessively voluminous. The appearance of this English book on operative surgery in a single volume is appealing, and the book represents the practices of a group of 16 outstanding English surgeons all working in the same hospitals. It is an integrated volume which has the advantages of contributions by a versatile group of special surgeons who mutually understand each other's thoughts and techniques. To make the book practical and keep it concise, yet broad in scope of material discussed, one good standard procedure for each operation has been given rather than tabulate a wide variety of procedures for the same operation. General surgery, plastic surgery, head and neck surgery, orthopedic surgery, neurosurgery, and genito-urinary surgery are covered. The illustrations are clear and good.

From the reviewer's standpoint the techniques advocated are fundamentally sound but rather antiquated and not too refined as modern surgical procedures are practiced in most surgical clinics in this country. Incisions in skin creases are not stressed, even in the hand where longitudinal incisions crossing skin creases may result in deformity and impaired function, aseptic bowel techniques are not mentioned, continuous suture lines are generally illustrated throughout, and many of the techniques on the simpler surgical procedures, as around the anus, are apt to be troublesome if commonly practiced by the general surgeon. The book is good but not outstanding. It will have little appeal to specialists, for the discussion of each special field is rather limited. The general practitioner doing surgical work will find rapid help to practical problems in this book, and by and large sound practice will result from following its recommendations.

THE EARLY DIAGNOSIS OF THE ACUTE ABDOMEN. By Zachary Cope, B.A., M.D., M.S. Lond., F.R.C.S. (Eng.), Consulting Surgeon to St. Mary's Hospital, Paddington, Late Hunterian Professor, Arris and Gale and Bradshaw Lecturer, Royal College of Surgeons. Tenth Edition. Oxford University Press, New York, 1951. 270 pages. \$3.50.

This is the tenth edition of a book which has become a classic in the early diagnosis of the acute abdomen. It is clearly and concisely written, adequately illustrated with diagrammatic and understandable drawings and x-rays, and